

Please type a plus sign (+) inside this box → ☐

PTO/SB/01 (12-97)

Approved for use through 9/30/00. OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

☐ Declaration
Submitted
with Initial
Filing

OR

☐ Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number

2149

First Named Inventor

Armand P. Neukermans

COMPLETE IF KNOWN

Application Number

/ (Unknown)

Filing Date

(Unknown)

Group Art Unit

(Unknown)

Examiner Name

(Unknown)

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

FLEXIBLE, COMPACT, MODULAR FIBER OPTIC SWITCH

the specification of which

(Title of the invention)

☐ is attached hereto
OR

☒ was filed on (MM/DD/YYYY) 15 SEP 1999 (15.09.99) as United States Application Number or PCT International

Application Number PCT/US99/21139 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box → +

PTO/SB/01 (12-97)

Approved for use through 9/30/00. OMB 0651-0032
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
PCT/US99/21139	(09/15/1999)	N/A

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: ☐ Customer Number ☐ *Place Customer*

☐ Customer Number

OR

☒ Registered practitioner(s) name/registration number listed below

Place Customer
Number Bar Code
Label here

Name	Registration Number	Name	Registration Number
Donald E. Schreiber	29,435		


☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☐ Customer Number
or Bar Code Label

OR ☒ Correspondence address below

Name	Donald E. Schreiber						
Address	Donald E. Schreiber A Professional Corporation						
Address	Post Office Box 64150						
City	Sunnyvale			State	CA	ZIP	94088-4150
Country	United States	Telephone	(408) 541-9168		Fax	(408) 541-9258	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Armand P.				Neukermans			
Inventor's Signature						Date	12/14/99
Residence: City	Palo Alto	State	CA	Country	US	Citizenship	US
Post Office Address	3510 Arbutus Avenue						
Post Office Address							
City	Palo Alto	State	CA	ZIP	94303	Country	US
<input type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto							

☐ Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

Please type a plus sign (+) inside this box → ☐

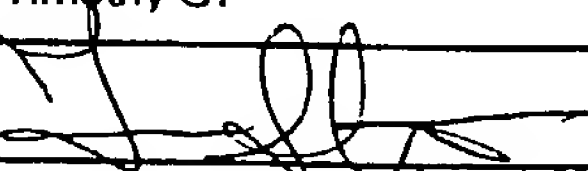
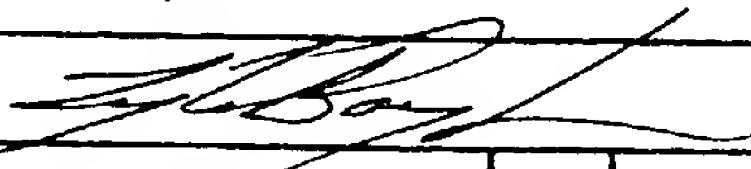
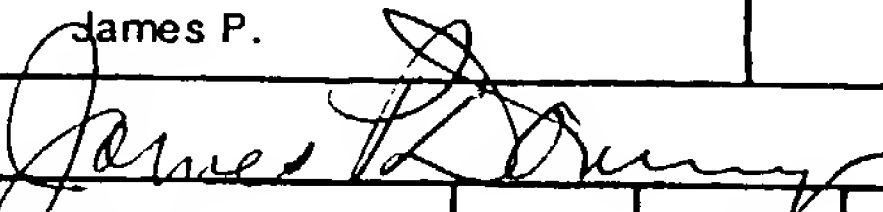
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

PTO/SB/02A (3-97)
Approved for use through 9/30/98. OMB 0651-0032
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

+

DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 4

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Timothy G.				Slater			
Inventor's Signature				Date		12/14/99	
Residence: City	San Francisco	State	CA	Country	US	Citizenship	US
Post Office Address	3715 Folsom St.						
Post Office Address							
City	San Francisco	State	CA	ZIP	94110	Country	US
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Tyler L.				Baughman			
Inventor's Signature				Date		12/14/99	
Residence: City	Campbell	State	CA	Country	US	Citizenship	US
Post Office Address	401 Harrison Avenue						
Post Office Address							
City	Campbell	State	CA	ZIP	95088	Country	US
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
James P.				Downing			
Inventor's Signature				Date		12/17/99	
Residence: City	Saratoga	State	CA	Country	US	Citizenship	US
Post Office Address	5084 Gypsy Hill Rd.						
Post Office Address							
City	Saratoga	State	CA	ZIP	95070	Country	US

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

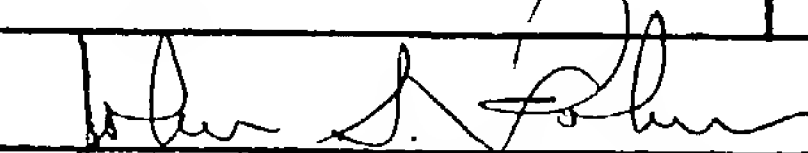

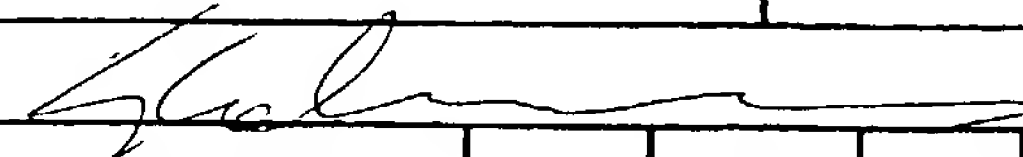
+

Please type a plus sign (+) inside this box → +

PTC/SB/02A (3-97)
Approved for use through 9/30/98. OMB 0651-0032
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
is required to respond to a collection of information unless it contains a

DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 2 of 4

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
John S.				Forker			
Inventor's Signature					Date		12/14/99
Residence: City		Palo Alto	State	CA	Country	US	Citizenship
Post Office Address		356 Kingsley Ave.					
Post Office Address							
City		Palo Alto	State	CA	ZIP	94301	Country
City		Palo Alto	State	CA	ZIP	94301	Country
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Gregory A.				Reznick			
Inventor's Signature					Date		12/14/99
Residence: City		Pleasanton	State	CA	Country	US	Citizenship
Post Office Address		1805 Brooktree Way					
Post Office Address							
City		Pleasanton	State	CA	ZIP	94566	Country
City		Pleasanton	State	CA	ZIP	94566	Country
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Sam				Calmes			
Inventor's Signature					Date		12/14/99
Residence: City		Mountain View	State	CA	Country	US	Citizenship
Post Office Address		2250 Latham Street, Apt. 10					
Post Office Address							
City		Mountain View	State	CA	ZIP	95070	Country
City		Mountain View	State	CA	ZIP	95070	Country

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. **DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.**

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.